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EXPERIMENTAL PATHOLOGY LABORATORIES, INC.

DYNAMAC CORPORATION PROJECT NO. HET K-002372-22

SUBCHRONIC STUDY OF 2,4-D IN RATS

PATHOLOGY REPORT

Submitted to:

Dynamac Corporation Rockville, MD 20852

January 16, 1989

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DYNAMAC CORPORATION PROJECT NO. HET K-002372-22

SUBCHRONIC STUDY OF 2,4-D IN RATS

PATHOLOGY SUMMARY

Microscopic evaluation of kidneys from 50 male and 50 female Fischer 344 rats was performed. These rats were on a 13-week study to evaluate the toxicological potential of technical grade 2,4-dichlorophenoxyacetic acid (2,4-D) herbicide. Following is the experimental design for this study:

Group No.	No. of Anim <u>Male Fe</u>	nals* emale	Dietary Level mg/kg/day
1	15	15	0
2	15	15	15
3	15	15	60
4	15	15	100
5	15	15	150

^{*}Histologic evaluation was performed on only 10 rats per sex at each dose group.

The microscopic changes for each kidney evaluated are presented in the Histopathology Incidence Tables. All lesions are summarized by sex and treatment group and presented in the Summary Incidence Tables.

RESULTS

Compound-related histomorphologic alterations were noted in the kidneys of both male and female rats in a dose-related manner. These lesions occurred in the outer stripe of the outer medulla, occasionally extending as medullary rays into the cortex proper. These lesions consisted of an increased number of cells in various tubules arranged more or less at regular intervals around the perimeter of this area. The term multifocal tubular cell hyperplasia was used for this change. In addition, a basophilic tint was present in the cytoplasm of the tubules in this area. Lesions occurred more frequently and were more severe in male rats than in female rats.

In the treated male rats, both of these alterations were present in nearly all of the animals examined; however, there was a definite and dramatic decrease in severity with decreasing dose, particularly in female rats receiving 15 mg/kg/day. In high dose males (150 mg/kg/day), multifocal tubular cell hyperplasia was graded moderate in eight rats and slight in two; tubular basophilia was graded moderate in three rats and slight in six. In males receiving 100 mg/kg/day, multifocal tubular cell hyperplasia was graded moderate in three rats and slight in seven; tubular basophilia was slight in four rats and minimal in six. In males receiving 60 mg/kg/day, multifocal tubular cell hyperplasia was slight in five rats and minimal in the other five; tubular basophilia was slight in two and minimal in seven. In the low

dose group (15 mg/kg/day), tubular cell hyperplasia was minimal in all but one rat and tubular basophilia was minimal in all 10.

In female rats, multifocal tubular cell hyperplasia was present in nearly all of the rats receiving 60, 100, and 150 mg/kg/day. Tubular basophilia was noted in nearly all of the treated rats. A definite dose relationship was evident, similar to that noted in the male rats. In the high dose females (150 mg/kg/day), multifocal tubular cell hyperplasia was graded slight in seven rats and minimal in three; tubular basophilia was slight in five rats and minimal in five. In females receiving 100 mg/kg/day, multifocal tubular cell hyperplasia and tubular basophilia were graded minimal in eight rats and slight in one. In females receiving 60 mg/kg/day, multifocal tubular cell hyperplasia was graded minimal in seven rats and slight in one; tubular basophilia was minimal in all 10. In low dose female rats (15 mg/kg/day), minimal tubular cell hyperplasia was noted in only one rat and minimal tubular basophilia was noted in seven.

It should be noted that in rats in which basophilia was noted to be minimal, variation in staining procedures and conditions may have been a factor. In rats in which tubular cell hyperplasia was graded minimal, only a few tubules in the affected area were diagnosed as having increases in cell number. In some cases, only two or three tubules were noted to be affected on the sections of kidneys examined.

The incidence of pelvic mineralization was also increased in treated rats. This lesion was noted in seven of 10 high dose males (150

mg/kg/day), one male receiving 100 mg/kg/day, three high dose females (150 mg/kg/day), five females receiving 100 mg/kg/day, and three females receiving 60 mg/kg/day. This lesion was not diagnosed in any of the control rats, low dose rats (15 mg/kg/day) or males receiving 60 mg/kg/day. There was no increase in the incidence of tubular mineralization, a lesion seen more frequently in female rats.

Spontaneous disease lesions and incidental findings were, for the most part, typical of the early lesions of chronic nephropathy occurring in aging rats. These lesions included interstitial nephritis, casts, interstitial fibrosis, and regenerative tubular epithelium. An early mesenchymal tumor was diagnosed in one high dose female and consisted of strands of embryonic-appearing mesenchyme proliferating between existing tubules and forming a space-occupying area. It should be noted that renal mesenchymal tumor tends to be a tumor of the young rats with rats over four months being resistant to its formation. Other lesions occurring infrequently were pelvic dilatation, tubular concretions, tubular pigment, and tubular vacuolization.

CONCLUSIONS

Histomorphologic alterations attributable to dietary administration of 2,4-D to Fischer 344 rats were present in the kidneys of rats receiving 15, 60, 100, and 150 mg/kg/day. These lesions occurred in the outer stripe area of the outer medulla and consisted of multifocal tubular cell hyperplasia and tubular basophilia. Lesions were more

severe and more frequent in males than in females. Lesions occurred in a dose-related manner. In females at the lowest dose, only minimal tubular basophilia was seen with minimal tubular cell hyperplasia occurring in only one rat. Pelvic mineralization was diagnosed only in treated rats and was present in the majority of the high dose males examined, in a single male receiving 100 mg/kg/day and in three to five females in the 60, 100, and 150 mg/kg/day groups.

Veterinary Pathologist

January 16, 1989

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QUALITY ASSURANCE FINAL CERTIFICATION

Client Name <u>Dynamac Corporation</u>	EPL Project Coordinator <u>Dr. William M. Busey</u>
Client Study <u>HET K-002372-22</u>	EPL Pathologist <u>Dr. Deborah A. Banas</u>
Species <u>Rat</u>	EPL Project Number <u>252-018</u>
Study Title <u>Subchronic Study of 2,4-D in Rats</u>	
Т	est rticle <u>2,4-D Technical Grade</u>
The following phases of this study (marked by Pathology Laboratories Quality Assurance Unit performed are as indicated below. All findin	"X") were inspected by Experimental . The dates of the inspections
Coordinator and to Management.	
(X) Part	<u>Date</u>
X 1 of 6 - Project Sheet	9/20/88
2 of 6 - Master IAWS	<u>N/A</u>
3 of 6 - Histology Setup	N/A
4 of 6 - Histology Completion	N/A
X 5 of 6 - Rough Draft Report	1/12/89
X 6 of 6 - Final Report	1/16/89
Other -	N/A
Date of last quarterly inspection	9/88
This study is certified to have been performe Practices.	
Quality Assurance July A Caoke -6-	Date <u>/ / / 6 · 8 9</u>
Form No. 45 (Revised 2/5/88)	

SUMMARY INCIDENCE TABLES

SUMMARY INCIDENCE TABLE

HET K-002372-22 Terminal Sacrifice Male Rat

	GROUP 1	GROUP 2	GROUP 3	GROUP 4	GROUP 5	
KIDNEY (NO. EXAMINED)	(10)	(10)	(10)	(10)	(10)	
Mesenchymal Tumor						
Cast(s)	7	8	5	1	2	
Interstitial Fibrosis	4	1	2	3	7	
Interstitial Nephritis	9	9	7	6	5	
Pelvic Dilatation, Unilateral				1		
Pelvic Mineralization				1	7	
Regenerative Tubular						
Epithelium	10	9	9	4	7	
Tubular Basophilia		10	9	10	9	
Tubular Cell Hyperplasia,						
Multifocal		10	10	10	10	
Tubular Concretion	4	2	5	3	3	
Tubular Mineralization	1	1.	2	2		
Tubular Pigment				1		
Tubular Vacuolization.	2	4	1	1	7	
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SUMMARY INCIDENCE TABLE

HET K-002372-22 Terminal Sacrifice Female Rat

	GROUP 1	GROUP 2	GROUP 3	GROUP 4	GROUP 5	
KIDNEY (NO. EXAMINED)	(10)	(10)	(10)	(10)	(10)	
Mesenchymal Tumor					11	
Cast(s)	3		1			
Interstitial Fibrosis	1	<u> </u>				
Interstitial Nephritis	5	4	1	1	4	
Pelvic Dilatation, Unilateral						
Pelvic Mineralization	<u> </u>		3	5	3	
Regenerative Tubular						
Epithelium	7	6	3	2	2	
Tubular Basophilia		7	10	9	10	
Tubular Cell Hyperplasia,						
Multifocal		1	8	9	10	
Tubular Concretion	1	2			1	
Tubular Mineralization	8	3	2	4	4	
Tubular Pigment			1	1.		
Tubular Vacuolization						

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DYNAMAC CORPORATION PROJECT NO. HET K-002372-22

SUBCHRONIC STUDY OF 2,4-D IN RATS

GROUP NO.	NO. OF ANIMALS* MALE FEMALE	<u>DIETARY LEVEL</u> MG/KG/DAY
1	15 15	0
2	15 15	15
3	15 15	60
4	15 15	100
5	15 15	150

^{*}Histologic evaluation was performed on only 10 rats per sex at each dose group.



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HET K-002372-22 Terminal Sacrifice Male Rat Scheduled Sacrifices	Å N I M A L	l a	7 8 - 4 8 8	B		7 8 - 4 8 9 2	8	8 - 4 8 9	8	8 - 4 8 9	7 8 - 4 8 9 7							
KIDNEY																		
Mesenchymal Tumor																		
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Cast(s)		1	1_		1	1	1	1		1	<u> </u>		 	<u> </u>	<u> </u>	 ļ		
Interstitial Fibrosis			<u> </u>	1			1	1		1								
Interstitial Nephritis		1	1		1	1	1	1	1	1	1					 		
Pelvic Dilatation, Unilate	ral			 		ļ	<u> </u>					<u> </u> 	 		<u> </u>	 	<u> </u>	
Pelvic Mineralization													<u></u>					
Regenerative Tubular																		
Epithelium		2	1	1	1	2	2	1	2	2	1							
Tubular Basophilia																		
Tubular Cell Hyperplasia,			<u> </u>															
Multifocal																		
Tubular Concretion			1				İ	1		1	_1							
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Tubular Pigment]														
Tubular Vacuolization					2		1											
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Terminal Sacrifice																			i İ	
Male Rat	A N	7	7	7	7	7	7		7	7	7					ŀ				. 1
Scheduled Sacrifices	ï	8	8	8	8	8	8	8	8	8	8			,					, J	.]
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KIDNEY			4	٦		<u>/</u>				<u>.</u>	٤					-				
Mesenchymal Tumor																				
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Cast(s)		1	1	1	1	1			1	1	1								<u> </u>	
Interstitial Fibrosis		_	ļ <u>.</u>		1									ļ		-				_
Interstitial Nephritis		1_	1	1	1	1		1	1	1	1								 	_
Pelvic Dilatation, Unilater	cal	<u> </u>														_			<u> </u>	\blacksquare
Pelvic Mineralization			1											ļ <u>-</u>		-				_
Regenerative Tubular													 	-		ļ			<u> </u>	_
Epithelium		1	1	1	1	1	1	1	1	<u> </u>	1		 _					ļ	 	_
Tubular Basophilia	· · · · · · · · · · · · · · · · · · ·	1	1	1	1	1	1	1	1	1	1				ļ	ļ	_			<u> </u>
Tubular Cell Hyperplasia,		ļ												_						
Multifocal		1_	1	1	2	1	1	1	1	1	1					<u> </u>				
Tubular Concretion								1			1							ļ	 	
Tubular Mineralization		1											 _	<u> </u>						
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Tubular Vacuolization		1		1	1_				1					<u> </u>				ļ		
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Male Rat	A N	1	7		7	7			7	7	7									
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KIDNEY																		,		
Mesenchymal Tumor																				
· ·												-								
Cast(s)		1	1					1		1	1									
Interstitial Fibrosis								1			1									
Interstitial Nephritis		1	1		1	1	1		1	1										
Pelvic Dilatation, Unilate	ral	<u> </u>															_			
Pelvic Mineralization													 							
Regenerative Tubular		_																		
Epithelium		2	1		1	1	1	1	2	1	1									
Tubular Basophilia		1	1		1	1	2	1	1	2	1									
Tubular Cell Hyperplasia,																				
Multifocal		1	2	1	1	2	2	1	2	2	1									
Tubular Concretion			1	1	1	_			1		1									
Tubular Mineralization					1			1												
Tubular Pigment		_																		
Tubular Vacuolization		1											 			ļ				
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KIDNEY							ļ 							 <u> </u>					
Mesenchymal Tumor														[
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Cast(s)					<u> </u>		<u> </u>	1		_	<u> </u>								
Interstitial Fibrosis		1	<u> </u>	1			<u> </u>		1		_								
Interstitial Nephritis		1		1_	2		1	1		1	Ĺ		ļ .	 					
Pelvic Dilatation, Unilatera	1			2	<u> </u>							<u></u>							
Pelvic Mineralization							2							 					
Regenerative Tubular					L				<u></u>	<u> </u>		<u> </u>							
Epithelium		1	1	1							1			Ĺ					
Tubular Basophilia		2	2	1	2	2	1	1	1	1	1								
Tubular Cell Hyperplasia,					<u> </u>		<u> </u>											!	
Multifocal		2	2	2	2	3	2	2	3	2	3						_		
Tubular Concretion		1			<u> </u>		1		1					 	<u> </u>				
Tubular Mineralization		1			<u> </u>					1		<u> </u>							
Tubular Pigment					<u> </u>					2				 <u></u>	<u> </u>				
Tubular Vacuolization			1				<u> </u>		<u></u>		<u> </u>								
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KIDNEY																				
Mesenchymal Tumor]								
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Cast(s)				1		1														
Interstitial Fibrosis		1	1	1	1	1	1	1												
Interstitial Nephritis			1		1	1	1	1					<u>_</u>	 						
Pelvic Dilatation, Unilatera	1														ļ					
Pelvic Mineralization				1	2	1		2	2	2	2	<u></u>								
Regenerative Tubular																				
Epithelium			1	1_	1	1	1	1		1				 						
Tubular Basophilia		2	2	2	2	3	2	3	3		2					ļ		<u> </u>		
Tubular Cell Hyperplasia,																				
Multifocal		3	3	2	3	3	3	3	3	2	3			 		ļ				<u> </u>
Tubular Concretion		1	1				<u> </u>			<u> </u>	1			 						
Tubular Mineralization							<u> </u>			ļ	<u> </u>					<u> </u>		<u>_</u> _		
Tubular Pigment														 	<u> </u>					}
Tubular Vacuolization		2		1	1	1	1	1	1	ļ										
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DYNAMAC CORPORATION PROJECT NO. HET K-002372-22

SUBCHRONIC STUDY OF 2,4-D IN RATS

GROUP NO.	NO. OF ANIMALS* MALE FEMALE	<u>DIETARY LEVEL</u> MG/KG/DAY
1	15 15	0
2	15 15	15
3	15 15	60
4	15 15	100
5	15 15	150

^{*}Histologic evaluation was performed on only 10 rats per sex at each dose group.



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KIDNEY		<u> </u>	4	<u> </u>	0		<u> </u>	9_	U	1	2			 						
Mesenchymal Tumor																				
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Cast(s)		1					1		1	<u>.</u>										
Interstitial Fibrosis								1						 						
Interstitial Nephritis		1	1	<u></u>	<u> </u>		1	1		1				 						\square
Pelvic Dilatation, Unilatera	1			<u> </u>								 								
Pelvic Mineralization				<u></u>								<u></u>		 	<u></u>					
Regenerative Tubular															<u> </u>					
Epithelium		1		1		1	1	1	1		1			 						
Tubular Basophilia															<u> </u>					
Tubular Cell Hyperplasia,				<u> </u>														<u> </u>		
Multifocal														 						
Tubular Concretion					<u></u>				1											
Tubular Mineralization		2	1	1	1	1		1		2	1			 	<u> </u>			<u></u>		
Tubular Pigment												<u> </u>			<u> </u>					
Tubular Vacuolization											<u> </u>			<u> </u>						
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HET K-002372-22 Terminal Sacrifice				ļ						·					,						
Female Rat	A	7	7	7	7	7	7	7	7	7	7							. :			
Scheduled Sacrifices	N ↓	8	8	8	8	8	8	8	8	8	8										
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		7	7		8	8	8	8	8	8	8					ľ					
		8	9	0	1	2		4	5	6	7										
KIDNEY										L											
Mesenchymal Tumor																	<u> </u>				
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Cast(s)				<u> </u>																	
Interstitial Fibrosis															ļ 						
Interstitial Nephritis							1		1	1	1										
Pelvic Dilatation, Unilate	ral																				
Pelvic Mineralization																					
Regenerative Tubular																					
Epithelium		1	1			1		1		1	1										<u> </u>
Tubular Basophilia			1	1		1	1_	1	1	1											
Tubular Cell Hyperplasia,																					
Multifocal									1												
Tubular Concretion					ļ <u>.</u>		1	1													
Tubular Mineralization	· <u>·</u>		1		1			1													
Tubular Pigment												 									
Tubular Vacuolization		$oxed{oxed}$			_																
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HET K-002372-22																			
Terminal Sacrifice Female Rat	A	7	7	7	7	7	7	7	7	7	7								
Scheduled Sacrifices	N	8	8	8		8				8	8								,
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		8	9	0	1	2	3	4	5	6	7								
KIDNEY				х															
Mesenchymal Tumor																			
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Cast(s)												ļ,							\square
Interstitial Fibrosis												l							
Interstitial Nephritis				<u> </u>	1							ļ						 	
Pelvic Dilatation, Unilater	a1	<u> </u>																 	
Pelvic Mineralization			2		1		1	1			1								
Regenerative Tubular				<u> </u>															\square
Epithelium		<u> </u>	1	<u> </u>	1													 	
Tubular Basophilia		1	1	<u></u> .	1	1	1	1	2	1	1								
Tubular Cell Hyperplasia,				<u> </u>															
Multifocal		1	1		1	1	2	1	1	1	1								
Tubular Concretion																			
Tubular Mineralization		<u> </u>	<u> </u>		1			1		1	1						 		
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Tubular Vacuolization		<u> </u>		<u> </u>															
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Tubular Cell Hyperplasia,			<u> </u>																	
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